U.S. Department of Labor Office of Labor Management Standards Washington DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No 1215 0188 Expires 11 30 2006

This report is mandatory under P L. 86-257 as amended Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

E OLHES		
1 File Number U 02657	2. Fiscal Year Covered From	
12490	7/1/04 Through 121/31/04	
3 Name and address of person filing	4 Name file number and address of labor organization	
Name JOSEPH & LIKI	Name DISTRICT COUNCIL 35	
	Labor Organization File Number 028657	
PO Box Bidg Room No If any	P O Box Building and Room Number if any	
Street 21 GRIMBS STREET	Street 25 COLGATE RUAD	
City SOUTH BOSTON	City RUSLINDAUS	
State MA ZIP Code + 4 02127	State MA ZIP Code + 4 02/3 /-//-	
5 Position in labor organization BUSINESS ATPR	ESENTATIVE	
A Held an interest in engaged in transactions (including loans) with or monetary value from an employer whose employees your organizate. 6 Name and address of Employer (including trade name. If any) Name Trade Name if any P O Box Bidg. Room No. If any Street City	7 a Nature of Interest, Transaction or Income 7 b Amount	
State ZIP Code + 4		
Sigi	nature	
15 Signature and verification. The undersigned declares, under penalty of	f Perjury and other applicable penalties of the law that all of the information typing documents) has been examined by the signatory and is to the best of the	

Form LM 30 (2003)

Page 1 of 2

Telephone Number

Disclaimer

The transactions, dealings and interests that are detailed in the attached Form L-M 30 represent my good faith effort to reconstruct the reportable occurrences for the periods of January 1 2004 to December 31, 2004 Accurate records of reportable occurrences were not kept for the 2004 fiscal year, and some items may have been unintentionally omitted. If, in the future, it comes to my attention that there exists a transaction, dealing or interest that should have been reported for the period of January 1 2004 to December 31 2004, I will file an amended Form L-M 30

End è End è

_	•
Name of Person Filling JOSEPH & III	(I File Number U 028657
B Held an interest in or derived income or economic benefit with monetary values substantial part of which consists of buying from, selling or leasing to or other of an employer whose employees your labor organization represents or is actively any part of which consists of buying from or selling or leasing directly or including with your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent, or directly to or otherwise
8 Name and address of Business (including trade name if any) Name DISTRICT COUNCIL 35 TRUST FUND Trade Name if any PO Box Bidg Room No if any CUTE 204 Street 25 COLGATE ROOM City RUSLINDALE State MA ZIP Code + 4 00/31-1/03	a Labor Organization b Trust c Employer
10 If 9 b or 9 c is checked give trust or employer's name	11 a Nature of such dealing
Name Trade Name if any: P O Box Bidg Room No if any Street City State ZIP Code + 4	SEAL ADVISORS PAVESTMENT CONTENDATE + BUSINESS EXPENSES AIRPARE #584. HOTEL 1334 TO EXPENSES 750 TO BUS. EXPENSES CO 11 b Approximate dollar value of such dealing #2610. 12 a Nature of interest held or income received
	12 b Amount.
C Received from any employer (other than an employer covered un or from any labor relations consultant to an employer any payment of mon-	der parts A and B above)
13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)	1 Ta Nature of payment
Name	<u> </u>
Trade Name if any	4
PO Box Bldg Room No If any	
Street	
City]
State ZIP Code + 4	
13 b. Is the Business an Employer or Consultant ?	14 b Amount of payment.

	~	
Name of Person Filing JOSEPU E TIR.	File Number U 028657	
B Held an interest in or derived income or economic benefit with monetary value substantial part of which consists of buying from selling or leasing to or otherwork of an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	Ase dealing with the business ely seeking to represent, or rectly to or otherwise	
8 Name and address of Business (including trade name if any). Name DISTRICT COVINCIA 25 TRUST FRANT Trade Name if any PO Box Bldg Room No if any SUITE 204 Street 25 CHGATE ROAT City ROBLINDBUE State RAA ZIP Code + 4 02131 172:	9 Business deals with a. Labor Organization b Trust c Employer	
10 If 9 b or 9 c is checked give trust or employer's name Name	11 a Nature of such dealing WHOTH HETETU, PENSION, ANNUATY WESTMANT MANS. REMENU CONF., HITEL \$557, EXPENSES \$331, 11 b Approximate dollar value of such dealing 12 a Nature of interest held or income received	
	12 b Amount.	
C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value		
13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)	14 a Nature of payment.	
Name		
Trade Name if any:		
PO Box Bldg Room No If any		
Street		
City		
State ZIP Code + 4		
13 b. Is the Business an Employer or Consultant ?	14 b Amount of payment.	

...

	<u>*</u>
Name of Person Filing JOSEPH & JARI	File Number U 02F657
B Held an interest in or derived income or economic benefit with monetary value substantial part of which consists of buying from, selling or leasing to or otherword an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	se dealing with the business ely seeking to represent, or rectly to or otherwise (
8 Name and address of Business (including trade name if any). Name Trade Name if any PO Box Bldg Room No if any Street	9 Business deals with a Labor Organization b Trust c Employer
State ZIP Code + 4	
10 If 9 b or 9 c is checked give trust or employer's name	11 a Nature of such dealing
Name Trade Name If any P O Box Bidg Room No If any Street City State ZIP Code + 4	11 b Approximate dollar value of such dealing 12 a Nature of interest held or income received 12 b Amount.
	120 Allouit.
C Received from any employer (other than an employer covered und or from any labor relations consultant to an employer any payment of mone) 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)	
Trade Name if any PO Box Bldg Room No if any STU FLOUR	MEETING
Street BOSTON State MA ZIP Code + 4 12 108-3108	
13 b. Is the Business an Employer or Consultant 7	14 b Amount of payment.

	•	
Name of Person Filing Josefu B. Th	File Number U 038657	
B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested		
8 Name and address of Business (including trade name if any) Name Trade Name if any P O Box Bidg Room No if any Street City State ZiP Code + 4	9 Business deals with a. Labor Organization b Trust c Employer	
10 If 9 b or 9 c is checked give trust or employer's name	11 a Nature of such dealing	
Trade Name if any P O Box Bidg Room No if any Street City State ZIP Code + 4	11 b Approximate dollar value of such dealing 12 a Nature of interest held or income received	
	12 b Amount.	
C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value		
13 a Name-and address of Employer or Labor Relations Consultant (including trade name if any) Name COLY CAPITAL Trade Name if any PO Box Bidg Room No if any 1444 Flows Street 127 PUBLIC SCUARE City CLEVE LAWD State OWO ZIP Code + 4 44474	INVESTMENT PERPORMANCE MEETING	
13 b. Is the Business an Employer or Consultant ?	14 b Amount of payment. \$136,	

File Number U 028657 OSEPU & ITPI Name of Person Filing B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested 8 Name and address of Business (including trade name if any) 9 Business deals with a. Labor Organization Trade Name if any b Trust PO Box Bldg Room No If any c Employer ZIP Code + 4 2000 6 11 a Nature of such dealing 10 If 9 b or 9 c is checked give trust or employer's name DINNER-LAM.C.I BUILD NO ENVELUPE CONPELENCE Name Trade Name If any PO Box Bldg Room No if any Street 11 b Approximate dollar value of such dealing City 12 a Nature of interest held or income received ZIP Code + 4 State 12 b Amount C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value 14 a Nature of payment. 13 a Name-and address of Employer or Labor Relations Consultant (including trade name if any) Name (Trade Name If any PO Box Bldg Room No if any Street City ZIP Code + 4 State 14 b Amount of payment. 13 b. is the Business an Employer or Consultant 7

Name of Person Filing TOSENU & TIR	File Number U 026 657
B Held an interest in or derived income or economic benefit with monetary value substantial part of which consists of buying from selling or leasing to or otherwork of an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	ise dealing with the business ely seeking to represent, or ectiv to or otherwise
8 Name and address of Business (including trade name if any) Name	9 Business deals with a. Labor Organization b Trust c Employer
10 If 9 b or 9 c is checked give trust or employer's name Name Trade Name if any P O Box Bidg Room No if any Street City State ZIP Code + 4	BUILDING ENVELOPE CONF WOTEL 11 b Approximate dollar value of such dealing 12 a Nature of interest held or income received
C Received from any employer (other than an employer covered und	12 b Amount. er parts A and B above)
or from any labor relations consultant to an employer any payment of money 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any) Name	or other thing of value 14 a Nature of payment.
Trade Name if any P O Box Bldg Room No if any Street City	
State ZiP Code + 4 13 b. Is the Business an Employer or Consultant 7	14 b Amount of payment

	107
Name of Person Filing JOSEPH & ZIA	T File Number U 028657
B Held an interest in or derived income or economic benefit with monetary vasubstantial part of which consists of buying from, selling or leasing to or other of an employer whose employees your labor organization represents or is act (2) any part of which consists of buying from or selling or leasing directly or in dealing with your labor organization or with a trust in which your labor organization.	rwise dealing with the business Evely seeking to represent, or directly to or otherwise
8 Name and address of Business (including trade name if any) Name	Business deals with a Labor Organization
Street 750 NEW YORK AND NOW City WASHINGTON State D C, ZIP Code + 4 2 0006	b Trust C Employer
10 If 9 b or 9 c. is checked give trust or employer's name	11 a Nature of such dealing
Name Trade Name if any P O Box Bidg Room No If any	LUNCHEUN - L.M C Z MEETING
Street	11 b Approximate dollar value of such dealing
State ZIP Code + 4	12 a Nature of interest held or income received
	12 b Amount
C Received from any employer (other than an employer covered upon from any labor relations consultant to an employer any payment of more	nder parts A and B above)
13 a Name-and address of Employer or Labor Relations Consultant (including trade name if any)	
Name	4
Trade Name if any	¬
PO Box Bidg Room No If any	
Street	-
State ZIP Code + 4	
13 b. Is the Business an Employer or Consultant ?	14 b Amount of payment.

Name of Person Filing JOSEPH E. TITAL	File Number U 02-8657
B Held an interest in or derived income or economic benefit with monetary values substantial part of which consists of buying from selling or leasing to or other of an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization or with a trust in which your labor organization.	vise dealing with the business rely seeking to represent, or rectly to or otherwise
8 Name and address of Business (including trade name if any) Name ZUPAT - CM C Z Trade Name if any	9 Business deals with a Labor Organization b Trust
Street / 750 NBUYORK ALPS, NW City WASH IN TOW State D C. ZIP Code +4 20006	i c Employer
10 If 9 b or 9 c is checked give trust or employer's name	11 a Nature of such dealing
Name Trade Name if any	LUNCHEUN - L.M.C. E/STAR!
PO Box Bldg Room No If any	
Street	11 b Approximate dollar value of such dealing
State ZIP Code + 4	12 a Nature of interest held or income received
	12 b Amount.
C Received from any employer (other than an employer covered unor from any labor relations consultant to an employer any payment of mone	der parts A and B above) ey or other thing of value
13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)	14 a Nature of payment
Name	
Trade Name if any	-
PO Box Bidg Room No If any	-
Street	
City	
State ZIP Code + 4	
13 b. Is the Business an Employer or Consultant ?	14 b Amount of payment.

Name of Person Filing JOSEIN E. ITAL	File Number U 028657
B Held an interest in or derived income or economic benefit with monetary val substantial part of which consists of buying from, selling or leasing to or other of an employer whose employees your labor organization represents or is actively any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	wise dealing with the business * vely seeking to represent, or * Inectly to or otherwise
8 Name and address of Business (Including trade name if any). Name TOIM TRAINING PROGRAM, TRUST Trade Name if any PO Box Bldg Room No if any Street COLGAGE PLANT	9 Business deals with a. Labor Organization b Trust c Employer
City	
10 If 9 b or 9 c. is checked give trust or employer's name Name Trade Name if any: P O Box, Bidg Room No if any	ENSTERN SEABSIAND APPRENTICES LANGUES TO GENERAL TO GEN
Street	11 b Approximate dollar value of such dealing 4/40/10
State ZIP Code + 4	12 a Nature of interest held or income received
	12 b Amount.
C Received from any employer (other than an employer covered unor from any labor relations consultant to an employer any payment of money	der parts A and B above) ey or other thing of value
13 a Name and address of Employer or Labor Relations Consultant (including trade name if any) Name	14 a Nature of payment.
Trade Name If any	
PO Box Bidg Room No if any Street	
Crty ZiP Code + 4	
13 b. Is the Business an Employer or Consultant ?	14 b Amount of payment

Name of Person Filing JOSEM E- IIIA	File Number U 02	8657	
B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested			
8 Name and address of Business (including trade name if any) Name JOIAN PROSPAM TRAINING TRUST Trade Name if any	9 Business deals with a Labor Organization		
PO Box Bldg Room No if any Street OS COL GASTE AMD City RUSLIMD AUS State MD ZIP Code + 4 Od (3)	b Trust c Employer		
10 If 9 b or 9 c. is checked give trust or employer's name Name Trade Name if any P O Box Bldg Room No if any	11 a Nature of such dealing SPRINGPIELD TECHNICA CONVECTS ANNUAL FUN	H COMMUNIT	
Street	11 b Approximate dollar value of such dealing 12 a Nature of interest held or income received	150, w	
State , ZIP Code + 4		-	
	12 b Amount		
C Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money	er parts A and B above) or other thing of value	_ <u> </u>	
13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)	14 a Nature of payment	Eq. 3	
Name		1	
Trade Name If any			
PO Box Bldg Room No If any			
Street		1	
State ; ZIP Code + 4		ı	
13 b. Is the Business an Employer 7 or Consultant 7	14 b Amount of payment.		
or Consonant			